



휴직
STOP WORK

CSO/WORKER NAME / CSO/사회복지 담당자 성명	TELEPHONE NUMBER / 전화번호
CLIENT IDENTIFICATION NUMBER / 신청인의 ID 번호	DATE / 날짜

Section 1: Fill out this section before taking it to your job that has ended.

제 1 항: 이 항을 먼저 가입한 후, 본 서류를 휴직한 직장으로 가져가십시오.

By signing here, I give my permission to my employer to complete this form for the Department of Social and Health Services. (본인의 고용주가 보건사회부(DSHS)용으로 본 서류를 작성해도 됨을 아래 본인의 서명으로 인가합니다.)

SIGNATURE / 서명	DATE / 날짜	PLEASE PRINT YOUR NAME HERE / 성명(활자체로 기입하십시오)
----------------	-----------	-----------------------------------------------

NAME OF COMPANY / 회사(직장)명

COMPANY ADDRESS: STREET ADDRESS / 회사(직장) 주소: 도로주소 CITY / 시 STATE / 주 ZIP CODE / 우편번호

Section 2: The person in the company who knows the employment and pay information fills out this section.

제 2 항: 본 항을 해당 직원(근로자)의 고용 및 급여 내용을 아는 담당자가 작성하여 주십시오.

1. What was the last date that the employee worked? _____

2. Amount of final paycheck (before taxes): \$ _____ Date received: _____

List the amounts (before taxes) and dates received for other paychecks received in the same month as the final paycheck:

AMOUNT RECEIVED (BEFORE TAXES)	DATE RECEIVED
\$ _____	_____
\$ _____	_____
\$ _____	_____
\$ _____	_____

3. Why did this job end?

☐ Lack of work ☐ Job was temporary/seasonal ☐ Laid off
☐ On leave (such as leave of absence or maternity leave). Is it: ☐ Paid ☐ Unpaid

If paid, how much is the employee paid: \$ _____

When is the employee expected to return? _____

☐ Other: _____

4. Will the employee receive any severance pay? ☐ yes ☐ No

IF YES: When will it be received? _____ How much will it be? \$ _____

5. Can the employee cash out vacation/sick pay? ☐ yes ☐ No

IF YES: When will it be received? _____ How much will it be? \$ _____

6. Can the employee withdraw retirement/pension/401K funds? ☐ yes ☐ No

IF YES: When will it be received? _____ How much will it be? \$ _____

Please provide the following in case we need to contact you:

SIGNATURE	DATE	TELEPHONE NUMBER
PRINT YOUR NAME HERE	POSITION/TITLE	